

PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

02/1

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



(703) 746-4000 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed n

maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Fee(s) Transmittal. T	of mailing can only be used for his certificate cannot be used and paper, such as an assignment	for any other accompanying
000513 759	90 12/15/2004			have its own certifica	ate of mailing or transmission.	01 10111111 01071119,
WENDEROTH, I 2033 K STREET N SUITE 800 WASHINGTON, D	LIND & PONACK, I . W. THE IC 20006-1021 TO C	COMMISSION	ER IS AUTI	I hereby certify that States Postal Service ORIZE addressed to the Ma	ertificate of Mailing or Trans this Fee(s) Transmittal is bein with sufficient postage for fir ail Stop ISSUE FEE address PTO (703) 746-4000, on the	smission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.
	100	NANGE ANT D	ELICIENCE	IN IND		(Depositor's name)
11/2005 MBEYENE2 00000	7931 10669743 FEE ACC	FOR THIS PAP	EK IU DEP Noze	0311		(Signature)
FC:1501 FC:1504	1400.00 0P	OUNT NO. 23-1	U9/3.			(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/669,743	0/669,743 09/25/2003		Yoshiro Furukawa		2003-1347A	4482
TITLE OF INVENTION: PR	OCESS FOR PREPARING	GLYCIDYLPHT	HALIMIDE			· *
APPLN, TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	03/15/2005
·	EXAMINER			CLASS-SUBCL ASS	¬	03/10/2003
WALLER, ROBIN REGINA		ART UN 1626		548-465000	J	
WALLER, ROBIN REGINA 1626 1. Change of correspondence address or indication of "Fee Address" (37				nting on the patent front page.		
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. WENDEROTH, LIND & PONACK, L.L.P.			
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNE DAISO CO., LTD	an assignee is identified bel 37 CFR 3.11. Completion o	low, no assignee f this form is NO	data will app F a substitute RESIDENCE	pear on the patent. If an assig		locument has been filed for
Please check the appropriate	assignee category or categor	ies (will not be pr	inted on the p	oatent): 🗖 Individual 💆	Corporation or other private gr	oup entity Government
4a. The following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
	AALL ENTITY status. See 3	7 CFR 1.27.	b. Applic	cant is no longer claiming SMA	ALL ENTITY status. See 37 C	FR 1.27(g)(2).
The Director of the USPTO i NOTE: The Issue Fee and Pu interest as shown by the reco	s requested to apply the Issue blication Fee (if required) w rds of the United States Pare	e Fee and Publicate ill not be accepted and Trademark	tion Fee (if and if the firm anyon of the firm anyon of the firm anyon of the firm and in the	ny) or to re-apply any previous e other than the applicant; a re	sly paid issue fee to the applications gistered attorney or agent; or the	ation identified above. the assignee or other party in
Authorized Signature	MICHAUKO	Mis	***	Date	February 9, 200	05
Typed or printed name Michael R. Davis			Registration No. 25,134			

T this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.